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Bib Data Sheet

CONFIRMATION NO. 6067

<b>SERIAL NUMBER</b> 09/542,477	<b>FILING DATE</b> 04/04/2000 <b>RULE</b>	<b>CLASS</b>	<b>GROUP ART UNIT</b> 3746	<b>ATTORNEY DOCKET NO.</b> TTX0164-US	
<b>APPLICANTS</b> Wang Cheng Chung, Taipei, TAIWAN;  <b>** CONTINUING DATA *****</b> <i>None</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 06/13/2000</b> <b>** SMALL ENTITY **</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>STATE OR COUNTRY</b> TAIWAN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Michael D Bednarek SHAW PITTMAN LLP. 1650 TYSONS BOULEVARD MCLEAN, VA 22102					
<b>TITLE</b> Inflatable product provided with built-in battery case and socket					
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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**Patent and Trademark Office**

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<b>SERIAL NUMBER</b> 09/542,477	<b>FILING DATE</b> 04/04/2000 <b>RULE</b> -	<b>CLASS</b> 005	<b>GROUP ART UNIT</b> 3628	<b>ATTORNEY DOCKET NO.</b> TTX0164-US	
<b>APPLICANTS</b> Wang Cheng Chung, Taipei, TAIWAN;					
<b>** CONTINUING DATA *****</b> None <i>MS</i>					
<b>** FOREIGN APPLICATIONS *****</b> None <i>MS</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** SMALL ENTITY **</b> ** 06/13/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature    Initials		<b>STATE OR COUNTRY</b> TAIWAN	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Michael D Bednarek Crowell & Moring LLP 1001 Pennsylvania Avenue NW Washington, DC 20004-2595					
<b>TITLE</b> Inflatable product <i>(circled)</i> provided with built-in battery case and socket					
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:				
<div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> All Fees  <input type="checkbox"/> 1.16 Fees ( Filing )  <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )  <input type="checkbox"/> 1.18 Fees ( Issue )  <input type="checkbox"/> Other _____  <input type="checkbox"/> Credit         </div>					

*MS*  
*8/2/01*